

12 18-01 A

UTILITY PATENT APPLICATION TRANSMITTAL <small>only for new nonprovisional applications under 37 CFR 1.53(b))</small>		Attorney Docket No. LFS-138 First Inventor Mahyar Z. Kermani Title BIOSENSOR APPARATUS AND METHODS WITH SAMPLE TYPE AND VOLUME DETECTION Express Mail Label No. EL710608761US									
APPLICATION ELEMENTS <small>See MPEP Chapter 600 concerning utility patent application contents.</small>		ADDRESS TO: Commissioner for Patents Box Patent Application Washington, DC 20231									
<p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <small>(submit an original and a duplicate for fee processing)</small></p> <p>2. <input type="checkbox"/> Applicant claims small entity status.</p> <p>3. <input checked="" type="checkbox"/> Specification [Total Pages 34] <small>(Preferred arrangement set forth below)</small> <ul style="list-style-type: none"> - Descriptive Title of the Invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R&D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (<i>if filed</i>) - Detailed Description - Claim(s) - Abstract of the Disclosure </p> <p>4. <input checked="" type="checkbox"/> Drawing(s)/35 USC 113) [Total Sheets 8]</p> <p>5. Oath or Declaration [Total Pages 3] <ul style="list-style-type: none"> a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <small>(for continuation/divisional with Box 18 completed)</small> <ul style="list-style-type: none"> i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). </p> <p>6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76</p> <p>18. <input type="checkbox"/> If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-Part (CIP) of prior application No.: , filed . Prior application information: Examiner Group Art Unit: </p> <p>For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation <u>can only</u> be relied upon when a portion has been inadvertently omitted from the submitted application parts.</p> <p>19. CORRESPONDENCE ADDRESS <input checked="" type="checkbox"/> Customer Number or Bar Code Label 000027777 <input type="checkbox"/> Correspondence Address below Name: Philip S. Johnson, Esq. Address: Johnson & Johnson One Johnson & Johnson Plaza New Brunswick, NJ 08933-7003 USA </p> <p>20. TELEPHONE CONTACT Please direct all telephone calls or telefaxes to Lois A. Gianneschi at: Telephone: (732) 524-6351 Fax: (732) 524-2808 </p> <p>21. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED</p> <table border="1" style="width: 100%;"> <tr> <td>NAME</td> <td>Lois A. Gianneschi</td> <td>Reg. No. 35519</td> </tr> <tr> <td>SIGNATURE</td> <td colspan="2"></td> </tr> <tr> <td>DATE</td> <td colspan="2">December 12, 2001</td> </tr> </table>			NAME	Lois A. Gianneschi	Reg. No. 35519	SIGNATURE			DATE	December 12, 2001	
NAME	Lois A. Gianneschi	Reg. No. 35519									
SIGNATURE											
DATE	December 12, 2001										

FEE TRANSMITTAL

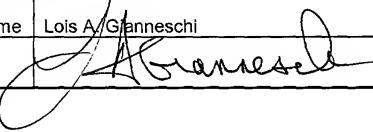
Complete if Known	
Application Number	
Filing Date	December 12, 2001
First Named Inventor	Mahyar Z. Kermani
Group Art Unit	
Examiner Name	
Attorney Docket Number	LFS-138

FEE CALCULATION**CLAIMS AS FILED**

(1)	(2)	(3)	(4)	(5)
FOR:	NUMBER FILED	NUMBER EXTRA	RATE	BASIC FEE \$710.00
TOTAL CLAIMS	28 - 20 =	8	x 18.00	\$ 144.00
INDEPENDENT CLAIMS	5 - 3 =	2	x 80.00	\$ 160.00
MULTIPLE DEPENDENT CLAIMS	<input type="checkbox"/>	N/A	\$270.00	
			TOTAL FEES	\$1,014.00

METHOD OF PAYMENT

- Please charge Deposit Account No. 10-0750/LFS0138/LG in the amount of \$1,014.00.
Three copies of this sheet are enclosed.
- The Commissioner is hereby authorized to charge any additional fees which may be required in connection with the filing of this communication, or credit any overpayment, to Account No. 10-0750/LFS0138/LG. Three copies of this sheet are enclosed.

SUBMITTED BY:		Complete (if applicable)
Typed or Printed Name	Lois A. Gianneschi	Reg. No. 35,519
Signature		Date: 12-12-01 Deposit Account No. 10-0750

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: MAHYAR Z. KERMANI

For : BIOSENSOR APPARATUS AND METHODS WITH SAMPLE TYPE
AND VOLUME DETECTION

Express Mail Certificate

"Express Mail" mailing number: EL710608761US

Date of Deposit: December 12, 2001

I hereby certify that this complete application, including specification pages, claims, drawings, un-signed Declaration and Power of Attorney, and Information Disclosure Statement, is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to the Commissioner for Patents, Washington, D.C. 20231.

A Combined Declaration and Power of Attorney will be submitted to the United States Patent and Trademark Office upon receipt of the U.S. Serial Number for this patent application.

Cryltal Washington

(Typed or printed name of person mailing paper or fee)


(Signature of person mailing paper or fee)